U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only AUG -8

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 4395		2. Fiscal Year Covered From:			
			1 / 1 / 2004 Through:	12 / 31	2004
Name and address of person filing.	4.1	Name,	file number, and address of labor orga	anization.	
Name Kenneth Lambert		Name Du Page County Building Trades			
	L	Labor C	Organization File Number 022-61	0	
P.O. Box, Bldg., Room No., if any	F	P.O. Bo	ox, Building and Room Number, if any	,	
Street 493 Bond Drive		Street 28600 Bella Vista Parkway			
City Batavia	(	City	Warrenville,		
State Illinois ZIP C	ode+4 60510	State	Illinois	ZIP Code + 4	60555
5. Position in labor organization. Financial Se	ecretary/Treasurer				

Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

and the second in the second i			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any	7.b. Amount		
Street	7.0. 741104114		
City			
State ZIP Code + 4			

## Signature

	the state of the information
15. Signature and verification. The undersigned declares, under penalty of Perjury and other	applicable penalties of the law, that all of the information
15. Signature and verification. The undersigned declares, the period of including the information contains an application of the period of including the information contains an application on period on the period of the period	has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties	in the instructions.)
undersigned's knowledge and belief, true, correct, and complete. (See the section on penaltics	

Telephone Number

Form LM-30 (2003)

Name of Person Filing Kenneth Lambert	Life Multiper G-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Arnold and Kadjan	a. Labor Organization		
Trade Name, if any:	b. Trust		
P.O. Box, Bldg., Room No., if any	c. Employer		
Street 19 W Jackson Blvd			
City Chicago			
State Illinois ZIP Code + 4 60604			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.  Attorney for IBEW Local 701 and affiliated Benefit		
Name	funds		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of such dealing. \$150,000		
City	12.a. Nature of interest held or income received.		
State ZIP Code + 4	Holiday dinner (with spouse) \$267;Brookstone radio \$185;Bottle of Vodka \$18		
	\$470		
	12.b. Amount.		
C. Received from any employer (other than an employer covered und or from any labor relations consultant to an employer any payment of money	er parts A and B above) y or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.		
(including trade name, if any).	Golf Outing		
Name National Electrical Contractors Association			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Suite 100			
Street 31W007 North Avenue			
City West Chicago			
State Illinois ZIP Code + 4 60185			
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment. \$125		

		File Number U-
Name of Person Filing Kenneth	Lambert	1 110 1 tall 120 1
Tham of the country and a testing of		L

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

		ł	
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Joint Apprentice and Training Committee	a. Labor Organization		
P.O. Box, Bldg., Room No., if any	b. Trust		
Street 28600 Bella Vista Parkeway	c. Employer		
City Warrenville,			
State Illinois ZIP Code + 4			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	and a mombous of	
Name	Apprentice and Training Fund - instructs members of Local 701. Does no direct monetary dealing with the Local.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street		and the second	
City			
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$0	
	12.a. Nature of interest held or income received.		
	JATC conference in Las Vegas, Nv. for Airfare, Meals and Hotel.	Reimbursements	
		4	
	12.b. Amount.	\$436	

Name of Person Filing Kenneth	Lambert	File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Chicago Equity Partners	a. Labor Organization		
Trade Name, if any:	i b. Trust		
P.O. Box, Bldg., Room No., if any Suite 3800	121		
Street 180 N. LaSalle	c. Employer		
City Chicago			
State Illinois ZIP Code + 4			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name IBEW Local 701 Pension Fund	Provides investment management services.		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Suite 1110			
Street 28600 Bella Vista Parkway			
City Warrenville	The second secon		
State Illinois ZIP Code + 4 60555	11.b. Approximate dollar value of such dealing.	\$2,500	
	12.a. Nature of interest held or income received.		
	Received tickets to a sporting ever	nt and concerts.	
		311111111111111111111111111111111111111	
		The state of the s	
	12.b. Amount.	\$700	